MISSOURI CIRCUIT COURT, TWENTY-SECOND JUDICIAL CIRCUIT PROBATE DIVISION, CITY OF ST. LOUIS

in the matter of	
	No
	Decedent
APPLICA	TION FOR LETTERS OF ADMINISTRATION
Come(s) now	
of lawful age, being first duly swo	rn upon oath, states:
That	, a male person, whose domicile and last
residence address was	,
in the City of St. Louis, Missouri,	and who was approximately years of age, died intestate on
the day of	,; that decedent left real property in the State
of Missouri of probable value of \$	and personal property of the probable value of
\$; that a	oplicant(s) resides at
	,
that applicant(s) as the	of decedent is entitled to relationship
be appointed personal representa	ative(s) of decedent's estate court supervision
(and if independent consents of	with/without all heirs to independent administration are attached hereto).
•	(if widowed-date of death of spouse).
single/ma	urried/widowed
Decedent's spouse, if any,is/is r	the parent of all of decedent's children.
,	at the NAMES, RESIDENCE ADDRESSES and RELATIONSHIPS to
decedent of the surviving spouse	, if any, and heirs are set forth below; further the names and
addresses of any guardians or co	onservators of any minors or disabled heirs and the birthdates of any
minor heirs are set forth below:	

HEIRS

Surviving spo	ouse:		
		RELATIONSHIP	
		TO DECEDENT AND	
		FRACTIONAL	BIRTHDATE
NAME	RESIDENCE ADDRESS	SHARE OF ESTATE	IF MINOR

whose names and make a perfect in and the law direct possession and pure lambda applicant	d addresses ventory of th ts, account for perform all the t(s) is a non-	r heirs known to applicate unknown to applicate estate, pay the debor and distribute or paings required by law tresident(s) of the Stabuntry, that applicant(cant(s). Applicate and legacies ay all assets what touching the addite of Missouri, or	ant(s) further state, if any, as far as thich come into	(s) that will ne assets extend estate.	
Name of Agent	Re	sidence Address	City	State	Zip Code	
as designee for s	ervice of pro	cess and receipt of n	otice.			
				Signature of Age	ent	
WHEREFORE, applicant(s) pray(s) the court appoint _			t appoint	(independent)		
personal representative(s) to administer decedent's e			s estate	supervi	sion of the court	
and upon filing th	e required bo	ond.	with/	without		
•	•	under oath or affirma dge and belief, subje	•			
Signature of Attorney for Applicant			Signature of Applicant			
Name of Attorney for Applicant (Typed) & MBE #			Name of Applicant (Typed)			
Address			Address			
City	State	Zip Code	City	State	Zip Code	
Telephone No.			Telephone I	No.		
Signature of Attorney for Applicant			Signature of Applicant			
Name of Attorney for Applicant (Typed) & MBE #		Name of Applicant (Typed)				
Address			Address			
City	State	Zip Code	City	State	Zip Code	
Telephone No.		Telephone No.				